## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

SHOT-1000 S

| CLAIMS AS FILED - PART I   |   |   |                               |                                    |              |                  |              | SMALL ENTITY       |  |              | OTHER THAN         |                        |
|--|---|---|-------------------------------|------------------------------------|--------------|------------------|--------------|--------------------|--|--------------|--------------------|------------------------|
| T-7  | OTAL CLAIMS   | · · · · · · · · · · · · · · · · · · ·     | (Column 1)                    |                                    | (Column 2)   |                  | 1            | TYPE               |  | OR           | SMALL ENTITY       |                        |
| TOTAL CLAIMS   |   |   | 23                            |                                    | ·            |                  |              | RATE               | FEE  | ].           | RATE               | FEE                    |
| FOR  |   |   | NUMBER FILED                  |                                    | NUMBER EXTRA |                  |              | BASIC FE           | E 385.00   | OR           | BASIC FEE          | 770.00                 |
| TOTAL CHARGEABLE CLAIMS  |   |   | 2.3 minus 20=                 |                                    | * 3          |                  | -            | X\$ 9=             | 22   | OR           | X\$18=             |                        |
| INI  | DEPENDENT C   | LAIMS                                     | 2 m                           | inus 3 =                           | *            |                  |              | X43=               |  | OR           | X86=               |                        |
| M  | JLTIPLE DEPE  | NDENT CLAIM P                             | RESENT                        |                                    |              |                  |              | +145=              |  | OR           | +290=              |                        |
| * 11   | the difference  | less than z                               | ss than zero, enter "0" in co |                                    |              |                  | TOTAL        | 412                | OR   | TOTAL        |                    |                        |
| CLAIMS AS AMENDED - PART II  |   |   |                               |                                    |              |                  |              |                    |  |              | OTHER              | THAN                   |
|  | ų. <u> </u>   | (Column 1)                                |                               | (Colun                             |              | (Column 3)       | umn 3) SMALL |                    |  | OR           | SMALL              |                        |
| AMENDMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                               | HIGHI<br>NUME<br>PREVIO<br>PAID F  | BER<br>BUSLY | PRESENT<br>EXTRA |              | RATE               | ADDI-<br>TIONAL<br>FEE                           |              | RATE               | ADDI-<br>TIONAL<br>FEE |
| NDI  | Total -   | *   | Minus                         | **                                 |              | =                |              | X\$ 9=             |  | OR           | X\$18=             |                        |
| AME  | Independent   | *   | Minus ***                     |                                    | O1 4114      |                  |              | X43=               |  | OR           | X86=               |                        |
| _  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                      |   |                               |                                    |              |                  |              | +145=              |  | OR           | +290=              |                        |
|  |   |   |                               |                                    |              |                  |              | TOTAL<br>DDIT. FEE | <del>                                     </del> | 1,_,         | TOTAL              |                        |
|  | (Column 1) (Column 2) (Column 3)  |   |                               |                                    |              |                  |              |                    |  | 10           | ADDIT. FEE         |                        |
| _  |   | CLAIMS                                    |                               | HIGHE                              | ST           |                  | ı            |                    | ADDI-  | 1 [          |                    | ADDI-                  |
| AMENDMENT B  |   | REMAINING<br>AFTER<br>AMENDMENT           |                               | NUME<br>PREVIO<br>PAID F           | USLY         | PRESENT<br>EXTRA |              | RATE               | TIONAL   |              | RATE               | TIONAL                 |
| MON  | Total   | *   | Minus                         | **                                 |              | =                |              | X\$ 9=             |  | OR           | X\$18=             | FEE                    |
| ME   | Independent   | *   | Minus                         | ***                                |              | =                | ╽┟           | X43=               | ·  | 1            | X86=               |                        |
| ٧  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                      |   |                               |                                    |              |                  | ╽┠           | 7402               |  | OR           |                    |                        |
| · · · · · · · · · · · · · · · · · · ·  |   |   |                               |                                    |              |                  |              | +145=              |  | OR           | +290=              |                        |
|  |   |   |                               |                                    |              |                  |              | TOTAL<br>DDIT. FEE |  | OR ,         | TOTAL<br>DDIT, FEE | ·                      |
|  | _   | (Column 1)                                |                               | (Colum                             |              | (Column 3)       | i            | -                  |  |              |                    | · •                    |
| AMENDMENT C  | `   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | ·                             | HIGHE<br>NUMB<br>PREVIOU<br>PAID F | ER<br>USLY   | PRESENT<br>EXTRA |              | RATE               | ADDI-<br>TIONAL<br>FEE                           |              | RATE               | ADDI-<br>TIONAL<br>FEE |
|  | Total   | •   | Minus                         | **                                 | _            | =                |              | X\$ 9=             |  | OR           | X\$18=             |                        |
| AME  | Independent   |   | Minus                         |                                    |              | =                | ┢            | X43=               |  | OR           | X86=               |                        |
| `  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                      |   |                               |                                    |              |                  |              | +                  |  | <sup>0</sup> |                    |                        |
| • н  | If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |                               |                                    |              |                  |              |                    | ·  | OR           | +290=              |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **TOTAL ADDIT. FEE  **OTAL ADDIT. FEE |   |   |                               |                                    |              |                  |              |                    |  |              |                    |                        |
| 1  | he "Highest Num   | ber Previously Paid                       | For (Total or                 | Independen                         | nt) is the l | nighest number   | found        | d in the app       | ropriate box                                     | in colu      | mn 1.              | I                      |